



Community Information			
County/City/Town		Population	
Primary Point of Contact		Secondary Point of Contact	
Name		Name	
Title		Title	
Phone		Phone	
Email		Email	
Criteria 1: Communications			
Location of 24 Hour Warning Point		Location of Emergency Operations Center	
Criterion 2: NWS Information Reception			
Warning Reception Capabilities and Location			
1			
2			
3			
4			
5			
6			
7			
8			
List any additional capabilities on a separate sheet if necessary			



Criterion 3: Weather & Water Monitoring	
Weather and Water Data Monitoring Capabilities and Location (EOC or Warning Point)	
1	
2	
3	
4	
5	
<i>List any additional capabilities on a separate sheet if necessary</i>	
Criterion 4: Local Warning Dissemination	
Dissemination Means	
1	
2	
3	
4	
5	
<i>List any additional capabilities on a separate sheet if necessary</i>	
Local Government Owned Buildings with Public Access	



	Building	Location	NOAA Weather Radio	Comments
1			G Yes G No	
2			G Yes G No	
3			G Yes G No	
4			G Yes G No	
5			G Yes G No	
6			G Yes G No	
7			G Yes G No	
8			G Yes G No	
9			G Yes G No	
<i>List any additional capabilities on a separate sheet if necessary</i>				

Criterion 5: Community Preparedness	
Number of Annual Safety Talks <i>(Indicate Topic, Location, and Presenter)</i>	
1	
2	
3	
4	
5	
<i>List any additional safety talks on a separate sheet if necessary</i>	
Other Community Preparedness Activities <i>(Indicate Activity, Location, and Organizer)</i>	



1	
2	
3	
4	
5	

List any additional safety talks on a separate sheet if necessary

Criteria 6: Administrative Tools/Record keeping

Formal Hazardous Weather Operations Plan	G Yes	G No
Spotter Roster and Training Record	G Yes	G No
Spotter Activation Criteria	G Yes	G No
Local Warning System(s) Activation Criteria	G Yes	G No
Last Visit by Emergency Manager to NWS Office		
Last Visit by NWS Officials to Community		
Annual Exercise Topic and Date		
Last NWS Spotter Training for Spotters and Dispatchers		
Last NWS Spotter Training Hosted/Co-Hosted <i>(For populations >40,000)</i>		

List any additional descriptions, narratives, or documentation on a separate sheet if necessary

applicant signature/date

County Emergency Manager signature/date